

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

LIGHTENED OFFSET PLATES, PREPARATION AND USE THEREOF

the specification of which (check only one item below):

is attached hereto.

was filed as United States application

Serial No. _____

and was amended

on _____

was filed as PCT international application

Number PCT/FR2005/0000492

on March 2, 2005

and was amended under PCT Article 19

on _____

(if applicable).

(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
FRANCE	0402174	03 MARCH 2004	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
FRANCE	0403943	15 APRIL 2004	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

Combined Declaration For Patent Application and Power of Attorney (Continued)
(Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international applications) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

U.S. APPLICATIONS

U.S. APPLICATION NUMBER

U.S. FILING DATE

PATENTED

PENDING

ABANDONED

PCT APPLICATIONS DESIGNATING THE U.S.

PCT APPLICATION NO.

PCT FILING DATE

U.S. SERIAL NUMBER(S)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute my application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Send Correspondence to:

DENNISON, SCHULTZ & MACDONALD
1727 KING Street, Suite 105
ALEXANDRIA, VA 22314-2700

Direct Telephone Calls to:

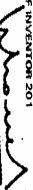
(703) 837 9600

Fax : (703) 837 0980

INVENTOR OR INVENTORS RESIDENCE & POST OFFICE ADDRESS	FAMILY NAME NOUVEL	FIRST GIVEN NAME Jean-Marie	SECOND GIVEN NAME	STATE OR FOREIGN COUNTRY FRANCE	COUNTRY OF CITIZENSHIP FRANCE
201 77760 VILLIERS SOUS GREZ				201 77760 VILLIERS SOUS GREZ	STATE & ZIP CODE/COUNTRY FRANCE
OFFICE/INVENTOR RESIDENCE & POST OFFICE ADDRESS	FAMILY NAME Lieses Hawks de Busseau	FIRST GIVEN NAME	SECOND GIVEN NAME		
202 CITY				COUNTRY OF CITIZENSHIP FRANCE	
POST OFFICE ADDRESS				STATE & ZIP CODE/COUNTRY FRANCE	
OFFICE/INVENTOR RESIDENCE & POST OFFICE ADDRESS	FAMILY NAME CITY	FIRST GIVEN NAME	SECOND GIVEN NAME	COUNTRY OF CITIZENSHIP FRANCE	STATE & ZIP CODE/COUNTRY FRANCE
203					

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 101 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201

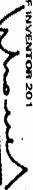


SIGNATURE OF INVENTOR 202

DATE

AUGUST 10, 2006

SIGNATURE OF INVENTOR 203



SIGNATURE OF INVENTOR 203

DATE

AUGUST 10, 2006